

Public Health Bulletin

A Publication of the Public Health Department, Gregory Thomas, M.D., Director • www.slopublichealth.org 2191 Johnson Avenue • P.O. Box 1489 • San Luis Obispo, CA 93406 • (805) 781-5500 • (805) 781-5543 fax

Gregory Thomas, M.D., M.P.H.



Health Director Notes...

The transition following closure of General Hospital and its emergency room/walk-in clinics is proceeding. The Family Care Centers have absorbed many of the walk-in clinic patients.

Hotline of San Luis Obispo County is providing telephone referral service for Safety Net patients at 549-8989. Hotline is working with EOC, which is providing Safety Net Healthcare Advocate services.

Immunization Update Broadcast

A satellite broadcast of the Centers for Disease Control (CDC) immunization update for 2003 will be held on August 21 from 10:00 to 11:30 a.m.

The annual update will highlight current and late-breaking immunization issues and should be attended by immunization providers including physicians, nurses, nurse practitioners, pharmacists, physician's assistants, medical assistants, DOD, and paraprofessionals.

The broadcast will be held in the Public Health Department's large conference room at 2191 Johnson Avenue in San Luis Obispo.

To make a reservation, call Kelly Lane at 781-5722.

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Planning Guidelines for the 2003-2004 Influenza Season

The 2003-2004 influenza vaccine formulation includes exactly the same formulation as the 2002-2003 season: A/New Caledonia/20/99-like (H1N1), A/Panama/2007/99 (H3N2), and B/Hong Kong/330/2001-like virus strains.

The Food and Drug Administration (FDA) does not recommend the use of any vaccine beyond its expiration date. Influenza vaccine produced in 2002 outdates June 30, 2003. The FDA has issued a statement, posted on its web site at www.fda.gov/cber/flu/flu.htm, to address issues concerning use of last season's influenza vaccine.

Vaccine Supply Projections

Vaccine manufacturers Aventis Pasteur and Powderject Vaccines (Powderject produces the Evans vaccines brand) project an aggregate total of 80-85 million doses of influenza vaccine for the U.S. market this year. This is 10-15 million doses below last year's total, yet greater than the estimated 79 million doses sold to individuals in 2002.

Vaccine Distribution

While the best time to be vaccinated against influenza continues to be October and November, a flu shot in December or later will still provide protection.

Top 3 Reasons to Get a Flu Shot

- 1) Prevent death Each year over 20,000 people in the U.S. die because of the flu-most are over 65 years old. More people die from the flu than from any other vaccine preventable disease.
- 2) Prevent severe illness The flu puts about 114,000 people in the hospital each year in the United States. Children younger than two years old are as likely to be hospitalized as those over 65.
- 3) Protect other people People who live with or care for others continued on page 3

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Public Health Connects to Network through New Satellite Downlink

San Luis Obispo County Public Health Department has installed new, state-of-the-art, satellite downlink equipment. This will allow us to receive the latest medical provider education, and information programs broadcast from the Centers for Disease Control and Prevention (CDC) in Atlanta, and other public health organizations.

With the installation of this equipment, we are now connected to a preparedness network that is able to respond immediately to breaking information from state and federal sources.

The satellite equipment installation helps complete the California Distance Learning Health Network (CDLHN) of 128 downlink sites, including 58 county health departments, three city health departments, and numerous hospitals, clinics, and universities.

Emergency Alert Notifications

In an effort to evaluate and improve the ability of the Public Health Department (PHD) to alert physicians of public health emergencies, the PHD will be sending out a countywide survey next month to all physicians. Currently the PHD uses a fax system to provide these alerts. The survey will allow physicians to provide feedback on the current system and input into an alternate system.

If you have questions or would like information on the Bio-Terrorism Preparedness Program, call Tracey Vardas at 788-2067.

Rabies Pre-Exposure Vaccine Available

Rabies pre-exposure vaccine is now available by appointment at the San Luis Obispo Public Health Department. The threedose series is given over a threeweek period of time. The cost of the vaccine is \$120 per dose plus a \$15 administration fee.

Rabies vaccine is recommended for those who work with rabies in laboratories, veterinarians, animal services workers, wildlife workers, spelunkers and for certain travelers to epizootic areas.

Prenatal Smoking May Affect Newborn Neurobehavior

NEW YORK (Reuters Health) June 3, 2003 – Smoking during pregnancy appears to affect a newborn's behavior in ways similar to heroin and crack cocaine exposure, new study findings suggest.

Smoking between 6 and 7 cigarettes per day throughout pregnancy was associated with infants that were more excitable, less consolable and more rigid than their unexposed peers, according to the report published in the June issue of Pediatrics.

"The smoking effects in our study underscore the importance of smoking cessation programs, particularly for women of childbearing age," lead author Karen L. Law, from Brown Medical School in Providence, Rhode Island, and colleagues note.

Several reports have shown that women who smoke while pregnant are twice as likely to have a low-birth weight infant compared to their non-smoking peers. But, according to the new report, few studies have examined how prenatal tobacco exposure may affect neurobehavior.

To investigate, the authors evaluated the behavior of 27 infants born to mothers who reported smoking an average of 6.7 cigarettes per day during pregnancy. Smoking habits were verified by measuring cotinine levels. These infants were compared to 29 infants born to non-smoking mothers.

Babies born to mothers who smoked showed more signs of stress in their central nervous, gastrointestinal and visual systems, required more handling and were more rigid than unexposed infants, the authors note.

The findings suggest that exposed infants may have been undergoing nicotine withdrawal.

Furthermore, the authors found that the extent of behavioral stress observed in exposed infants was comparable to that seen in infants born to mothers who use heroin and other opiate drugs. Also, the stress behaviors of exposed infants were similar to those seen in preterm infants.

Still, further studies are needed to better define the dose-response relationship. For example, "we don't know if a woman quits smoking six months into pregnancy if that will make a difference, "Law said in a statement. (Pediatrics 2003;111:1318-1323.)

Everyone is at Risk for Lyme Disease

Studies have shown that the bacteria causing Lyme disease can enter the central nervous system, including the brain, in less than a week's time after a tick bite. although most are not aware of being bitten.

lack of a definitive test and the presence of co-infections acquired growing each day now including babesiosis, Ehrlichiosis, and bartonella. Treatment of Lyme disease may be delayed or inappropriate, leading to chronic disease.

If a tick bite is noted and the tick is available, a physician or patient may have the Public Health Department test the tick to see if it is the species that carries Lyme disease. If it is, it can then be sent out for Diagnosis is difficult due to the testing to determine if it is a carrier of Lyme disease.

For more information, access The by the bite of the same tick—a list American Lyme Disease Foundation, Inc. and the Center for Disease Control web sites at: www.aldf.com/ and www.cdc.gov/ncidod/diseases/ lyme/lyme.htm

Smoking Cessation Tool Kits Available to Health Care Providers in County

Health care providers across many disciplines can and **do** play a critical and effective role in helping smoking patients quit.

The Next Generation California Tobacco Control Alliance has developed the Health Care Provider's Tool Kit for Delivering Smoking Cessation Services. The Tool Kit contains:

- Information on tracking patients' smoking status.
- Service delivery models for implementing the 5 A's (Ask, Advise, Assess, Assist, Arrange)
- Prescribing guide for cessation pharmacotherapies.
- Treatment recommendations for special populations.

The Tool Kit was developed in collaboration with health provider associations, managed care organizations, tobacco control experts, researcher and community advocates. Information in the Tool Kit draws on the evidence-based Treating Tobacco Use and Dependence Guidelines developed by the U. S. Public Health and Human Services.

The Tool Kit is designed to help increase clinician knowledge in discussing the risks of tobacco use, the benefits of quitting, and the physiological and emotional process a patient may go through when quitting. The kit also provides information about online professional resources for CME credits and cessation training.

To receive a Tool Kit, call the county's Tobacco Control Program at 781-5564.

Pediatric Clinic Open in Morro Bay

A Pediatric Clinic next to the Morro Bay Health Department is open 20 hours a week for clients up to 19 years of age.

The clinic is operated by the Family Care Center, with funding by the First Five Children and Families Commission of San Luis Obispo County (Prop. 10) in collaboration with County Public Health.

The clinic opened in March 2002 and now has a transportation voucher system for clients in need. Medi-Cal, Healthy Families, CHDP and private insurance are accepted.

Hours of operation are: Mondays: 8 a.m. - 5 p.m.Wednesdays: 8 a.m. - noon Fridays: 8 a.m. - 5 p.m.

For an appointment or to get more information, call 772-6515.

Health Director (cont.)

Please consider copying the DEET article insert for patients. Avoiding mosquito bites is particularly important if West Nile Virus arrives here this summer.

Finally, the San Luis Obispo County Public Health Bulletin is now available online at www.slopublichealth.org by clicking on Public Health Bulletin.

Influenza Season (cont.)

who are at high risk of serious illness from the flu need a flu shot. They can give the flu to these people if they get the flu themselves.

A complete schedule of the San Luis Obispo County Public Health flu clinics will be available the end of August.

San Luis Obispo County Reported Cases of Selected Communicable Diseases - 2003

Disease J	an-Mar	April	May	June	Total 2003	Total 2002
AIDS	3	0	2	0	5	20
Amebiasis	0	0	0	0	0	0
Campylobacter	11	0	1	1	13	28
Chlamydia	134	50	33	42	259	46
Coccidioidomycosis	13	1	1	0	15	42
Cryptosporidiosis	1	0	1	0	2	3
E. Coli 0157:H7	0	0	0	0	0	5
Giardia	3	1	1	0	5	12
PPNG	0	0	0	0	0	0
Gonorrhea	13	7	3	6	29	30
Hepatitis A	2	0	0	0	2	6
Hepatitis B	0	0	0	1	1	26
Hepatitis C Acute	0	0	0	0	0	1
Hepatitis C Chronic	147	32	35	84	298	11
Hepatitis, Unspecified	0	0	0	0	0	0
Measles (Rubeola)	0	0	0	0	0	0
Meningitis - Total	3	0	0	0	3	15
Meningitis - Viral	3	0	0	0	3	10
Meningitis, H-Flu	0	0	0	0	0	0
Meningococcal Disease	e 0	0	0	0	0	0
Pertussis	2	0	0	0	2	1
Rubella	0	0	0	0	0	0
Salmonellosis	2	0	0	0	2	10
Shigellosis	3	0	0	0	3	3
Syphilis - Total	3	0	0	1	4	12
Tuberculosis	3	0	3	0	6	5



San Luis Obispo County Public Health Department P.O. Box 1489 San Luis Obispo, CA 93406

DEET: Why It Can't Be Beat

By Brian Reid Special to The Washington Post Tuesday, May 6, 2003; Page HEO8

For all the counting of dead birds, the treating of ponds thick with mosquito larvae and the possibility of widespread spraying, the final line of defense against West Nile remains the human skin. Keep the insects away from that fragile barrier and the risk plunges to zilch.

The scientific consensus of the best way to do that remains clear: In the United States, nothing comes close to DEET. Since the government developed the chemical 50 years ago, it's become the gold standard for keeping all manner of creepy-crawlies at bay. Especially mosquitoes.

In a study published last year in the New England Journal of Medicine, 15 hardy volunteers from the staff at the University of Florida shoved their arms into a cage full of underfed mosquitoes after slathering on one of 13 different kinds of repellents and three repellent wristbands. Four concentrations of DEET were included, as well as four members of the Avon Skin-So-Soft products provided near-100 percent effectiveness for some period of time. But the key difference among the repellents was the length of that effectiveness.

The results were unambiguous. DEET-based products claimed the top three spots, with Deep Woods Off, topping the DEET scale with a concentration of 23.8 percent DEET, keeping the bugs at bay for more than five hours, on average. No citronella product and no version of Skin-So-Soft – including Avon's Bug Guard Plus, with a new bug-

repelling chemical, IR3535 – worked for more than an hour.

"I think that if you're looking for the insect repellent that's going to last the longest, you're not going to find many people who will say anything is better than DEET," said Mark Fradin, a dermatologist at the University of North Carolina, who led the New England Journal study.

The study had a few detractors, including Avon, which said the arm-in-a-cage study design was flawed and that the company's own studies showed Bug Guard Plus worked for three hours or more. But Fradin's results match those in May's issue of Consumer Reports. That effort, also a cage test, put eight DEET-based repellents up against Avon's new formulation and, again, every DEET product outlasted Bug Guard Plus.

That's not to say that non-DEET repellents aren't effective. The Environmental Protection Agency (EPA) requires some proof that the stuff will keep the skeeters from biting before it will allow a company to market a bug repellent. Consumer Reports found that benefits of most non-DEET products so limited that it didn't even bother to test them.

The problem, says Andrew Spielman, a professor of tropical public health at the Harvard School of Public Health, is that the protection offered is, at best, "transient."

Spielman said he sticks with the DEETbased products, though he said he uses the repellent cautiously. There are reports of medical problems, including seizures and

continued on other side

DEET continued

deaths, linked to large doses of the chemical, though the EPA sees no significant risks from the normal use of the chemical. Still, Spielman advocates prudence.

"Just as a general principle," he said, "one should optimize for the minimum possible use of anything, be it aspirin or DEET. I use it only when I need it."

The American Academy of Pediatrics (AAP) recommends using only products with DEET concentrations of less than 10 percent on children, and pediatricians have recommended avoiding the use of the chemical on children under 2 years old. However those guidelines were put in place in 1999, before West Nile emerged. A pediatrician writing in the AAP's house publication suggested that babies older than two months can tolerate products as concentrated as 30 percent DEET without significant risk. Both the AAP and the EPA say the repellents should be kept off little hands and away from mouths and open wounds.

For the youngest babies, mosquito netting is likely to do the trick. For the rest of the population putting a layer of clothing between them and the bloodsuckers might not be worth the discomfort, Fradin said. Nets "are not going to work if the fabric comes in contact with your skin," he said – the mosquitoes will simply bite through the cloth. "And if it's 105 degrees and you're hiking around, it's going to be uncomfortable."

The best protection against West Nile, however, might be to simply avoid the bugs, rather than wage chemical warfare. While the mosquitoes that emerge in the coming months will no doubt be bloodthirsty, Spielman said the West Nile-transmitting insects won't make their appearance until later in the season. A significant population of birds carrying the virus is required to support a number of infected mosquitoes sufficient to increase human risk.

"It's being outside in the garden at midnight late in the transmission season that's the risky situation. The need for protection in midsummer is pretty minimal because transmission is pretty rare," he said.

But it's probably worth slathering up for those harmless early season mosquitoes, anyway, he concedes. "A couple, three weeks from now, we'll be bitten," Spielman said. The pests may not carry disease, but "they are annoying."